



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4467

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------------|
| SERIAL NUMBER 10/743,264 | FILING DATE 12/23/2003 RULE | CLASS 315 | GROUP ART UNIT 2821 | ATTORNEY DOCKET NO. 071469-0306171 |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------------|

APPLICANTS

Bill H. Quon, Brea, CA;

Wayne L. Johnson, Phoenix, AZ;

** CONTINUING DATA *****

Yes E.A.

This application is a CON of PCT/US02/20868 07/02/2002
 which claims benefit of 60/302,361 07/03/2001

** FOREIGN APPLICATIONS *****

No E.A.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/02/2004

| | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------|--------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged <i>Examiner's Signature: [Signature] Initials: E.A.</i> | CA | 7 | 11 | 2 |

ADDRESS

00909
 PILLSBURY WINTHROP SHAW PITTMAN, LLP
 P.O. BOX 10500
 MCLEAN, VA
 22102

TITLE

Inter-stage plasma source

| | | |
|------------|-------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| RECEIVED | | |